2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

May 17, 2006 8:00 am Secretary of State DOCUMENT # C10428 1. Fullity Name 05-17-2006 90017 030 ****61.25 MOUNT HOREB CHAPTER NO. 6, ROYAL ARCH MASONS Principal Place of Business Mailing Address 189 W. AIRPORT BLVD 189 W. AIRPORT BLVD PENSACOLA FL 32505 PENSACOLA FL 32505 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 23-7591064 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GILMAN, RICHARD A CALDWELL, DREXEL P Street Address (P.O. Box Number is Not Acceptable) 4168 AQUA VISTA DRIVE 2110 W CYPRESS ST PENSACOLA FL 32501 Zip Code 32504 City PENSACOLA 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 5-10-2006 Richard A. Gilman Signature, typed or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE ☐ Change ☐ Delete PEREZ, CHARLES NAME NAME 7649 NORTHPOINTE DRIVE STREET ADDRESS STREET ADDRESS PENSACOLA FL 32514 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change M Addition GILMAN, RICHARD A NAME NAME 4168 AQUA VISTA DRIVE STREET ADDRESS STREET ADDRESS PENSACOLA FL 32504 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition JACOBS, WILLIAM R HAYNO, DALE L NAME NAME 2378 WINDSTONE DRIVE STREET ADDRESS 4057 SHERIDAN DR. STREET ADDRESS PENSACOLA FL 32526 **RACE FL 32571** CITY-ST-ZIP CITY-ST-7IP TITLE TITLE Change ☐ Delete ☐ Addition LAROSE, ARTHUR J NAME NAME STREET ADDRESS 2646 SHERRILANE DRIVE STREET ADDRESS CITY-ST-ZIP CANTONMENT FL 32533 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ▼ Addition LECROY, CHARLES T NAME NAME WALKER, DAVID A JR 2985 BENT OAK RD STREET ADDRESS STREET ADDRESS. 1600 GOVERNORS DR # 1313 PENSACOLA FL 32526 PENSACOLA FL 32504 CITY - ST- ZIP CITY-ST-ZIE Change □ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

A J LaRose A Laker

5-10-2006

850-712-6102

FILED